



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 2024

<b>SERIAL NUMBER</b> 10/806,186	<b>FILING or 371(c) DATE</b> 03/23/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 13180-30	
<b>APPLICANTS</b> Milan Graovac, Toronto, CANADA; Zoran Pavlovic, Toronto, CANADA; <b>** CONTINUING DATA *****</b> This application is a CIP of 10/397,331 03/27/2003 ABN <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 06/01/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JEFFREY GERBEN HOEKSTRA/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 42	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> BERESKIN AND PARR 40 KING STREET WEST BOX 401 TORONTO, ON M5H 3Y2 CANADA					
<b>TITLE</b> Weighted gradient method and system for diagnosing disease					
<b>FILING FEE RECEIVED</b> 648	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		